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Sender's Name: Daniel M. Sculnick

Ser. No.: 09/750,373

Cozen Ref. No.: PHRM0001-100/0008US(130913)

Pages Including Cover: 31

Date: November 17, 2003

OFFICIAL FAX

RECIPIENT(S)	COMPANY/FIRM	FAX
Robert S. Landsman	USPTO/GROUP 1647	(703) 872-9306

MESSAGE: OFFICIAL FACSIMILE

PLEASE DELIVER TO: Robert S. Landsman  
ENCLOSED IS:

1. Transmittal Form (1 Page)
2. Fee Transmittal (1 Page)
3. Amendment And Request for Reconsideration (24 Pages)
4. Product Sheet for Anti-GPCR-75; Product sheet for GPCR Control Peptides and antibodies (MD Bio); Product Sheet for GPCR ORF clones (Invitrogen) (4 Pages)

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

0

## Complete if Known

Application Number 09/750,373  
 Filing Date December 28, 2000  
 First Named Inventor Peter Lind  
 Examiner Name Robert S. Landsman  
 Art Unit 1647  
 Attorney Docket No. PHRM0001-100/0008US

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
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☒ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
176	-176 **		0
13	-13 **		0

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	66	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$) 0

\*\*or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	2053	65	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	280	2403	145	Request for oral hearing	
1451	1,810	1451	1,810	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1801	1,330	2801	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	840	2503	420	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
1806	180	1806	180	Submission of Information Disclosure Sheet	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2001	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$) 0

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	Registration No. (Attorney/Agent)	Telephone
Daniel M. Sognick	52,201	215-665-8828
Signature	Date	November 17, 2003

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